

BLP 118.1 US

**PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY****I HEREBY DECLARE THAT:**

My residence, post office address, and citizenship are as stated next to my name in PART A on page 2 hereof.

I believe I am the original, first, and sole inventor (if only one name is listed) or an original, first, and joint inventor (if plural names are listed) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **A Neurofuzzy Based Device For Programmable Hearing Aids** the specification of which:

☒ is attached hereto;

☐ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose all information to the Patent and Trademark Office known to me to be material to patentability of this application, as defined in Title 37, Code of Federal Regulations, Sec. 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Sec. 119 of any foreign application(s) for patent or inventor's certificate listed in PART B on page 2 hereof and have also identified in PART B on page 2 hereof any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

I hereby claim the benefit under Title 35, United States Code, Sec. 120 of any United States application(s) listed in PART C on page 2 hereof and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Sec. 112, I acknowledge the duty to disclose all information to the Patent and Trademark Office known to me to be material to patentability of this application, as defined in Title 37, Code of Federal Regulations, Sec. 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application.

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following as my attorneys or agents with full power of substitution to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith:

Randall T. Erickson	Reg. No. 33,872	Kathleen A. Lyons	Reg. No. 31,852	Keith V. Rockey	Reg. No. 24,713
Nancy R. Gamburd	Reg. No. 38,147	John P. Milnamow	Reg. No. 20,635	Thomas I. Ross	Reg. No. 29,275
Stephen D. Geimer	Reg. No. 28,846	Lisa V. Mueller	Reg. No. 38,978	Joel E. Siegel	Reg. No. 25,440
Allen J. Hoover	Reg. No. 24,103	Paul M. Odell	Reg. No. 28,332	Paul M. Vargo	Reg. No. 29,116
Martin L. Katz	Reg. No. 25,011	Robert B. Polit	Reg. No. 33,993		

whose mailing address for this application is:

**ROCKEY, MILNAMOW & KATZ, LTD.**  
Two Prudential Plaza - Suite 4700  
180 North Stetson Avenue  
Chicago, Illinois 60601  
Telephone: (312) 616-5400

See Page 2 attached, signed, and made a part hereof.

# PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

## PART A: Inventor Information and Signature

Full name of SOLE or FIRST inventor Stavros Photios Basseas  
 Citizenship U.S.A. Residence 921 S. Crescent  
Park Ridge, Illinois 60068  
 Post Office Address (If different) \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of SECOND joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Second Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of THIRD joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Third Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of FOURTH joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Fourth Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of FIFTH joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Fifth Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PART B: Prior Foreign Application(s)

Serial No.	Country	Day/Month/Year Filed	Priority Claimed	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No

## PART C: Claim for Benefit of Filing Date of Earlier U.S. Provisional Application:

Serial No. 60/062,354	Filing Date 10/15/97	Status: Pending	
	<input type="checkbox"/> Patented	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending <input type="checkbox"/> Abandoned

See Page 2 attached, signed, and made a part hereof.

**Change Of Attorney Or Agent's Address In Application  
(37 CFR 1.8(a))**

Docket No.

8362/85877 (Parent) (BEL-0472)

In Re Application Of: **Stavros Photios Basseas**

Serial No.  
Not Yet Assigned

Filing Date  
December 29, 2003

Examiner  
Not Yet Assigned

Group Art Unit  
Not Yet Assigned

Invention: **NEUROFUZZY BASED DEVICE FOR PROGRAMMABLE HEARING AIDS**

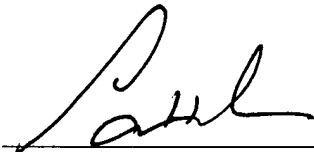
**TO THE COMMISSIONER FOR PATENTS**

Please send all correspondence for this application to:

**Paul M. Vargo  
WELSH & KATZ, LTD.  
120 South Riverside Plaza  
22nd Floor  
Chicago, Illinois 60606-3912**

Please direct all telephone calls to:

**312-655-1500**



*Signature of Attorney or Agent of Record*

Dated: **December 29, 2003**

**Paul M. Vargo, Reg. No. 29,116**

*Registration Number & Address of Attorney or Agent of Record*

I certify that this document is being deposited on  
with the U.S. Postal Service as  
first class mail under 37 C.F.R. 1.8 and is addressed to the  
Commissioner for Patents, P.O. Box 1450, Alexandria, VA  
22313-1450.

*Signature of Person Mailing Correspondence*

**Michelle Harris**

*Typed or Printed Name of Person Mailing Correspondence*

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## CERTIFICATE OF MAILING

In re application of: Stavros Photios Basseas

For: A Neurofuzzy Based Device For  
Programmable Hearing Aids

Serial No.: 09/170,671

Filed: October 13, 1998

Group Art Unit: 3738  
Attention: Box Missing Parts  
ASSISTANT COMMISSIONER OF PATENTS  
Washington, D.C. 20231

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Assistant Commissioner of Patents Washington, D.C. 20231, on the date below.

*Lawena K. Lieber*  
*Dec 9, 1998*  
(Date)

Sir:

Completion of Filing Requirements

Transmitted herewith in response to the Office letter dated October 28, 1998 are:

- ☒ Declaration or oath for this application.
- ☒ Notice to File Missing Parts - Response Copy.
- ☐ Statement(s) of Small Entity Status. (Filed 9-25-97)
- ☐ Other:
- ☐ Filing fee for this application.
- ☒ Missing Parts surcharge fee for this application.
- ☒ A check in the amount of \$ 130.00 to cover the filing fee and/or surcharge is enclosed.
- ☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 04-1644.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 04-1644. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 04-1644. A duplicate copy of this sheet is enclosed.

*Paul M. Vargo*  
Paul M. Vargo, Registration No. 29,116

ROCKEY, MILNAMOW & KATZ, LTD.  
180 North Stetson Street  
Two Prudential Plaza - Suite 4700  
Chicago, Illinois 60601  
312/616-5400

December 9, 1998

BLP 118.1 US

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 Citizenship U.S.A. Residence 921 S. Crescent  
Park Ridge, Illinois 60068  
 Post Office Address (If different) \_\_\_\_\_

Inventor's signature: *S. Basseas* Date: 12/03/98

Full name of SECOND joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Second Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of THIRD joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Third Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of FOURTH joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Fourth Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of FIFTH joint inventor, if any \_\_\_\_\_  
 Citizenship \_\_\_\_\_ Residence \_\_\_\_\_  
 Post Office Address (If different) \_\_\_\_\_

Fifth Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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		<input type="checkbox"/> Patented	<input type="checkbox"/> Pending <input type="checkbox"/> Abandoned



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/170,671	10/13/98	BASSEAS	S BLP-118.1US

ROCKEY MILNAMOW & KATZ LTD.  
TWO PRUDENTIAL PLAZA  
180 NORTH STETSON AVENUE  
SUITE 4700  
CHICAGO IL 60601

0232/1028

NOT ASSIGNED

3738

DATE MAILED:

10/28/98

**NOTICE TO FILE MISSING PARTS OF APPLICATION**  
**Filing Date Granted**

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☒ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☒ non-small entity is \$ 130.00.

- ☐ 1. The statutory basic filing fee is:
- ☐ missing.
  - ☐ insufficient.
- Applicant must submit \$ \_\_\_\_\_ to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- ☐ 2. Additional claim fees of \$ \_\_\_\_\_, including any multiple dependent claim fees, are required.
- \$ \_\_\_\_\_ for \_\_\_\_\_ independent claims over 3.
- \$ \_\_\_\_\_ for \_\_\_\_\_ dependent claims over 20.
- \$ \_\_\_\_\_ for multiple dependent claim surcharge.
- Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.
- ☒ 3. The oath or declaration:
- ☒ is missing or unexecuted.
  - ☐ does not cover the newly submitted items.
  - ☐ does not identify the application to which it applies.
  - ☐ does not include the city and state or foreign country of applicant's residence.
- An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.
- ☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.
- A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- ☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

- ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).
- ☐ 7. Your filing receipt was mailed in error because your check was returned without payment.
- ☐ 8. The application does not comply with the Sequence Rules.
- See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."
- ☐ 9. OTHER: \_\_\_\_\_

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

**A copy of this notice MUST be returned with the reply.**

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE